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New York City Puts E-Health Records Online For 200,000 Patients

City leaders say their initiative has created the largest community based e-health records network in the United States and can serve as a national model.

By [K.C. Jones](#)
[InformationWeek](#)

February 26, 2008 11:49 AM

New York City leaders have unveiled an electronic health records initiative that they say will set a new standard for health care throughout the United States.

Mayor Michael Bloomberg and New York City Health Commissioner Dr. Thomas Frieden said the city's e-health records program is well on its way to equipping more than 1,000 providers and creating the country's largest community-based e-health records network. Bloomberg said that 200,000 New Yorkers currently benefit from the technology deployed by more than 200 primary care providers.

"In Washington, they talk about how our health care system should be reformed; here in [New York City](#), we are actually doing it," Bloomberg said during a news conference Monday.

Frieden emphasized how the system helps prevent disease. "By giving doctors and patients the tools to better manage conditions such as high blood pressure and high cholesterol, we can prevent thousands of strokes, heart attacks, and early deaths," he said.

The New York City Health Department's Primary Care Information Project uses eClinicalWorks' software, which promotes prevention. It developed the e-health records and offers subsidized software and services to primary care providers with more than 30% of their patients on Medicaid or uninsured. The packages include licensing, onsite training, data interfaces, and two years of maintenance and support.

The primary care givers must pay for hardware and network infrastructure and contribute \$4,000 to the Fund for Public Health in New York for ongoing technical support.

The Health Department also helps other practices integrate the prevention tools into their own e-health records.

City leaders said that the prevention tools integrate patient health history, lab results, and current medications; improve follow-up care by sending patient reminders; increase preventative screenings by reminding physicians to perform them during routine exams; and decrease the risk of adverse drug reactions by tracking prescriptions and flagging potential interactions.

They also provide charts and graphs for tracking blood pressure and cholesterol; outline the most effective drug treatments and doses for various ailments; provide instant referrals; send prescriptions electronically or by fax. They track patient medication use and identify those who need help following prescription instructions. Finally, they monitor the quality of preventive and compare results among doctors and practices

A \$3.2 million grant from New York State supports the e-health records initiative and \$5 million in funding from the Centers of Disease Control and Prevention and the Agency for Healthcare Research and Quality help evaluate it.

New York State Health Commissioner Dr. Richard F. Daines said electronic health programs must align with the State's proposals to link reimbursement to quality outcomes.

"New York State is also funding a statewide health information network so that no matter where a patient is seen in New York, an authorized physician will have access to that patient's electronic health record," he said. "This represents a breakthrough for patients and doctors."

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10 message(s). Last at: Feb 26, 2008 6:08:19 PM

Mary Visco

commented on Feb 26, 2008 12:49:55 PM

This will make it nearly impossible to get an unbiased second opinion. A misdiagnosis will be forever electronically enshrined. Health insurers will find a way to comb the data base to exclude conditions or rescind coverage. I see as much potential for harm as for good. Millions of pieces of personal health and other identifying information just sitting there waiting for some hacker to steal it and sell it. Where are the controls?

Jose Gonzalez

commented on Feb 26, 2008 1:15:33 PM

Mary is absolutely right, Although I am not at all surprised at this outright violation of privacy. Slowly but surely take away our constitutional rights. Why not just include ss#, credit report history and dna reports while you are at it.

ramon

commented on Feb 26, 2008 1:17:32 PM

the insurance companies will be the primary beneficiaries, not the patients !

Anon in NM

commented on Feb 26, 2008 1:20:35 PM

Big "Bro" takes another leap into our lives. There are no controls. Once our info is released from the pvicey of our record's jacket in our provider's file, each digial step (imaging, etc.) increases our vulnerability. Patients will now seek medical care outside of the prying eyes of their own state. It appears that investment in a medical complex across the border in NJ our PA would be a good deal.

Fritz

commented on Feb 26, 2008 1:31:29 PM

Bloomberg playing with money again. Not much more.
Wonder how this fits in with HIPPA?? ? ? ?

Debby

commented on Feb 26, 2008 1:32:21 PM

WARNING: These types of databases are also NOT protected by HIIPA laws esp. when provided by third party software providers! No privacy left!
As everyone seems to forget, the DATA belongs to YOU - when we can start charging for access to our own DATA - this stuff will stop!! And wonder how long it will take to be "outsourced!!" A retired IT exec

Pete333

commented on Feb 26, 2008 1:47:58 PM

Electronic Health Records (EHR) are just about the only way modern technology can be brought to bear to help people. Having a half dozen GPs scattered across a country holding bits and pieces of your lifetime medical history is not a solution.

Anyway, universal healthcare will be forced on you American laggards by the general availability of genetic and other upcoming sophisticated testing. Insurance will only become available for the very upper tier of genetically and physically sound. Everyone else.. well, kinda won't get healthcare. That's just the way it is, or at least or soon will be.

Jon

commented on Feb 26, 2008 2:44:24 PM

Bloomberg for President!

shiela

commented on Feb 26, 2008 3:05:58 PM

The reason insurance companies and their mandates needs to be changed. Currently, they are for-profit companies. Medical care and health are "merely happy accidents." (One of the reasons I have difficulties with certain proposals on the table.)

There should be no such thing as "prior conditions." The key is continuity for each person/patient.

As for the "second opinion": that's a misnomer. This is designed to help physicians (and others) avoid repeating testing inappropriately, but more so, to assure that recommended preventive care is undertaken - at least the intention. The question is how the "preventive" flags are decided upon and how implemented. They are as important to notify the patient as the physician.

There is a difference between Health care and Medical Care. The former, designed to optimize the health you have and prevent your developing ailments - much like brushing your teeth, immunizations, seat belts, what and how you eat, move etc. The latter deals with the "boo-boos" and results of living (sometimes not too well, or too well) as well as the roll of the dice (genetic risk)- the traumas, the chronic diseases (e.g. asthma/emphysema, diabetes, hypertension, cancers, etc etc.)

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